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APPLICANTS

Dominique Bourel, La Madeleine, FRANCE;
 Sylvie Jorieux, Villeneuve D'Ascq, FRANCE;
 Christophe De Romeuf, Lambersart, FRANCE;
 Philippe Klein, Lille, FRANCE;
 Christine Gaucher, Sequedin, FRANCE;
 Nicolas Bihoreau, Orsay, FRANCE;
 Emmanuel Nony, Antony, FRANCE;

** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

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** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Met after Allowance Initials	FRANCE	4	10

ADDRESS

FOLEY AND LARDNER LLP
 SUITE 500
 3000 K STREET NW
 WASHINGTON, DC 20007
 UNITED STATES

TITLE

Use of adcc-optimized antibodies for treating weak patients

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit